## **Application Data Sheet**

Applicatio	n Inforn	nation
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Application Type::

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: HEPARANASE INHIBITORS AND USES

**THEREOF** 

Regular

Attorney Docket Number:: VAN GELDER1A

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: Yes

Latin Name::

Variety Denomination Name::

Petition Included:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

**Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Israeli

Status:: Full Capacity

Given Name:: Joel

Middle Name::

Family Name:: VAN GELDER

Name Suffix::

City of Residence:: Jerusalem

State or Province of Residence::

Country of Residence:: Israel

Street of Mailing Address:: 14/B Moshe Sharet Street

M.

City of Mailing Address:: Jerusalem

State or Province of Mailing Address::

Country of Mailing Address:: Israel

Postal or Zip Code of Mailing Address:: 96920

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Israeli

Status:: Full Capacity

Given Name:: Yochai

Middle Name::

Family Name:: BASEL

Name Suffix::

City of Residence:: Rehovot

State or Province of Residence::

Country of Residence:: Israel

Street of Mailing Address:: 43 Najara Street

City of Mailing Address:: Rehovot

State or Province of Mailing Address::

Country of Mailing Address:: Israel

Postal or Zip Code of Mailing Address:: 76566

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Israeli

Status:: Full Capacity

Given Name:: Boris

Middle Name:: O.

Family Name:: KRAIZ

Name Suffix::

City of Residence::

Ramla

State or Province of Residence::

Country of Residence::

Israel

Street of Mailing Address::

1 Beitar Street

City of Mailing Address::

Ramla

State or Province of Mailing Address::

Country of Mailing Address::

Israel

Postal or Zip Code of Mailing Address::

72426

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Israeli

Status::

**Full Capacity** 

Given Name::

Orly

Middle Name::

Family Name::

MOUALLEM

Name Suffix::

City of Residence::

Jerusalem

State or Province of Residence::

Country of Residence::

Israel

Street of Mailing Address::

1 Ruth Street

City of Mailing Address::

Jerusalem

State or Province of Mailing Address::

Country of Mailing Address::

Israel

Postal or Zip Code of Mailing Address::

93101

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Israeli

Status::

-

**Full Capacity** 

Given Name::

Daphna

Middle Name::

Family Name::

**MIRON** 

Name Suffix::

City of Residence::

Rehovot

State or Province of Residence::

Country of Residence::

Israel

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Initial 8/7/2006

Street of Mailing Address::

3/6 Habustan Street

City of Mailing Address::

Rehovot

State or Province of Mailing Address::

Country of Mailing Address::

Israel

Postal or Zip Code of Mailing Address::

76564

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Israeli

Status::

**Full Capacity** 

Given Name::

Nina

Middle Name::

Family Name::

**GUR-ARIE** 

Name Suffix::

City of Residence::

Rishon LeZion

State or Province of Residence::

Country of Residence::

Israel

Street of Mailing Address::

8/7 Hahalil Street

City of Mailing Address::

Rishon LeZion

State or Province of Mailing Address::

Country of Mailing Address::

Israel

Postal or Zip Code of Mailing Address::

75574

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Israeli

Status::

Full Capacity

Given Name::

Joseph

Middle Name::

Family Name::

**KLEIN** 

Name Suffix::

City of Residence::

Haifa

State or Province of Residence::

Country of Residence::

Israel

Street of Mailing Address::

19 Hana'amat Street

City of Mailing Address::

Haifa

State or Province of Mailing Address::

Initial 8/7/2006

Country of Mailing Address::

Israel

Postal or Zip Code of Mailing Address::

34670

**Correspondence Information** 

Correspondence Customer Number::

001444

Representative Information

Representative Customer Number::

001444

**Domestic Priority Information** 

Application::

Continuity Type::

Parent

Parent Filing

Application::

Date::

This Application

National Stage of

PCT/IL05/000149

02-06-05

PCT/IL05/000149

Appln claiming benefit of 35 USC 119(e)

60/541,904

02-06-04

**Foreign Priority Information** 

Country::

Application Number::

Filing Date::

Priority Claimed::

**Assignment Information** 

Assignee Name::

Insight Biopharmaceuticals Ltd.

Street of Mailing Address::

12 Hamada Street, Rabin Science Park,

P.O. Box 2128

City of Mailing Address::

Rehovot

State or Province of Mailing Address::

Country of Mailing Address::

Israel

Postal or Zip Code of Mailing Address::

76121